

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			2/12/01
FORMALITY REVIEW	Kel	305/705	03-01-01
RESPONSE FORMALITY REVIEW	ust-	571	06/15/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	6-25-02
2	8-21-02
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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